



Patent
240/182 (prev. 6646-108N5)

2643
#16
smc
8/2/04

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of:

Ronald A. KATZ

Serial No.: 09/317,807

Filed: May 24, 1999

For: MULTIPLE FORMAT TELEPHONIC
INTERFACE CONTROL SYSTEM

)
) **Group Art Unit:** 2643
)

) **Examiner:** S. Woo
)

) **Office Action Mailed:**
) January 23, 2001
)

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AMENDMENT TRANSMITTAL

Box Fee Amendment
Commissioner for Patents
Washington, D.C. 20231

Sir:

Transmitted herewith is an Amendment and Response to Office Action for the above-identified application.

- ☐ "Small Entity Status" of this application under 37 CFR §§ 1.9 and 1.27 has been established by a Verified Statement previously submitted.
- ☐ A Verified Statement to establish "Small Entity Status" under 37 CFR §§ 1.9 and 1.27 is enclosed.
- ☒ Applicant(s) petitions for an extension of time under 37 CFR § 1.136 [fees: 37 CFR § 1.17(a)(1)-(4)] for the total number of months checked below:

CERTIFICATE OF MAILING UNDER 37 CFR 1.8

I hereby certify that this document (along with any referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as First Class mail in an envelope addressed to the Commissioner for Patents, Washington, D.C. 20231

Date

July 23, 2001

Reena Kuyper, Registration No. 33,830

EXTENSION (months)	FEE FOR SMALL ENTITY	FEE FOR OTHER THAN SMALL ENTITY
1 month	<input type="checkbox"/> \$55.00	<input type="checkbox"/> \$110.00
2 months	<input type="checkbox"/> \$195.00	<input type="checkbox"/> \$390.00
3 months	<input type="checkbox"/> \$445.00	<input checked="" type="checkbox"/> \$890.00
4 months	<input type="checkbox"/> \$695.00	<input type="checkbox"/> \$1,390.00

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- ☐ An extension for _____ months has already been secured and the fee paid therefor _____ is deducted from the total fee due for the total months of extension now requested.
- ☒ Extension fee due with this Request \$890.00.
- ☐ **NO ADDITIONAL EXTENSION FEE IS REQUIRED.**

FEES FOR CLAIMS:

The fees for claims (37 CFR § 1.16(b)-(d)) have been calculated as shown below:

Total Claims	10	-	20	=	0	x	\$18.00	\$0.00
Independent Claims	3	-	3	=	0	x	\$80.00	\$0.00
Multiple Dependent Claims	\$270	(if applicable)					<input type="checkbox"/>	\$0.00
TOTAL OF ABOVE CALCULATIONS								\$0.00
Reduction by ½ for Filing by Small Entity. Note 37 CFR §§ 1.9, 1.27, 1.28.								
If applicable, Verified Statement must be attached.								<input type="checkbox"/> \$0.00
TOTAL FEES FOR CLAIMS SUBMITTED HERewith								\$0.00

- ☐ A check in the amount of _____ is enclosed to cover the above fee(s).
- ☒ Charge Deposit Account No. **50-1636** in the amount of _____.

- ☒ The Commissioner is authorized to charge Applicant's Deposit Account No. **50-1636** for any fees required under 37 CFR §§ 1.16, 1.17 and 1.445 that are not covered, in whole or in part, by a check enclosed herewith and to credit any overpayments to said Deposit Account **50-1636**.

Respectfully submitted,

Dated: July 23, 2001

9220 Sunset Blvd., Suite 315
Los Angeles, California 90069
(310) 247-2860

By: Reena Kuyper
Reena Kuyper
Registration No. 33,830